Senate Study Bill 1232 - Introduced

SENATE FILE	
ВУ	(PROPOSED COMMITTEE ON
	HUMAN RESOURCES BILL BY
	CHAIRPERSON MILLER-MEEKS)

A BILL FOR

- 1 An Act relating to reimbursement for dually eligible Medicare
- 2 and Medicaid members receiving the Medicare hospice benefit
- 3 and Medicaid-only members electing the hospice benefit in a
- 4 nursing facility.
- 5 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

S.F. ___

- 1 Section 1. DUALLY ELIGIBLE MEDICARE AND MEDICAID MEMBERS
- 2 AND MEDICAID-ONLY MEMBERS RECEIVING HOSPICE BENEFIT IN A
- 3 NURSING FACILITY ELIMINATION OF PASS-THROUGH PAYMENT.
- 4 1. The department of human services shall request federal
- 5 approval from the centers for Medicare and Medicaid services of
- 6 the United States department of health and human services for
- 7 a section 1115 demonstration waiver to allow for the payment
- 8 of the nursing facility room and board expenses for a dually
- 9 eligible Medicare and Medicaid member receiving the Medicare
- 10 hospice benefit or a Medicaid-only member electing the member's
- 11 hospice benefit, to allow Medicaid managed care organizations
- 12 and the Medicaid fee-for-service payment system to reimburse
- 13 the nursing facility directly for the room and board expenses
- 14 at no less than ninety-five percent of the nursing facility's
- 15 Medicaid fee-for-service rate rather than indirectly as a
- 16 pass-through payment from the hospice services provider.
- 17 The department of human services shall report receipt of
- 18 such approval to the chairpersons and ranking members of
- 19 the appropriations committees of the house and senate, the
- 20 co-chairpersons and ranking members of the joint appropriations
- 21 subcommittee on health and human services, and the legislative
- 22 services agency.
- 23 2. The department of human services shall adopt rules
- 24 pursuant to chapter 17A to administer this section and
- 25 specifically to allow Medicaid managed care organizations and
- 26 the department's fee-for-service Medicaid payment system to
- 27 reimburse a nursing facility directly for the room and board
- 28 expenses at no less than ninety-five percent of the nursing
- 29 facility's Medicaid fee-for-service rate as provided in this
- 30 section.
- 31 EXPLANATION
- The inclusion of this explanation does not constitute agreement with the explanation's substance by the members of the general assembly.
- 34 This bill requires the department of human services (DHS)
- 35 to request federal approval from the centers for Medicare and

1 Medicaid services of the United States department of health and 2 human services for a section 1115 demonstration waiver to allow 3 for the payment of the nursing facility room and board expenses 4 for a dually eligible Medicare and Medicaid member receiving 5 the Medicare hospice benefit or a Medicaid-only member electing 6 the member's hospice benefit, to allow Medicaid managed care 7 organizations (MCOs) and the Medicaid fee-for-service (FFS) 8 payment system to reimburse the nursing facility directly for 9 the room and board expenses at no less than 95 percent of the 10 nursing facility's Medicaid FFS rate rather than indirectly 11 as a pass-through payment from the hospice services provider. 12 The bill requires DHS to report receipt of such approval to 13 the chairpersons and ranking members of the appropriations 14 committees of the house and senate, the co-chairpersons and 15 ranking members of the joint appropriations subcommittee 16 on health and human services, and the legislative services 17 agency. The bill requires DHS to adopt administrative rules 18 to administer the bill and specifically to allow Medicaid MCOs 19 and the department's FFS Medicaid payment system to reimburse a 20 nursing facility directly for the room and board expenses at 21 no less than 95 percent of the nursing facility's Medicaid FFS 22 rate as provided in the bill. 23 Currently, the Medicare hospice benefit covers the costs of 24 palliative care for an individual who is terminally ill in the 25 individual's home or in a nursing facility. Medicare does not 26 have a long-term custodial nursing facility benefit, so if an 27 individual elects the Medicare hospice benefit in a nursing 28 facility, the individual's room and board are not covered by 29 Medicare and the individual or a third-party payor must pay for 30 the costs of the room and board. For those individuals dually 31 eligible for Medicare and Medicaid who elect the Medicare 32 hospice benefit, Medicare is financially responsible for the 33 hospice care and the Medicaid program is the third-party payor 34 responsible for the nursing facility room and board expense. 35 For the nursing facility room and board care, the Medicaid

1 program must provide for payment in an amount equal to at least

- 2 95 percent of the Medicaid daily nursing facility base rate
- 3 (the rate the state Medicaid program pays for nursing facility
- 4 services furnished to an individual who has not elected to
- 5 receive hospice care). Historically, the Medicaid program
- 6 has paid the hospice provider for the nursing facility room
- 7 and board expenses of dually eligible individuals who elect
- 8 the hospice benefit, and the hospice provider has then passed
- 9 this payment on to the nursing facility under a contract with
- 10 the nursing facility. Current practice is for most hospice
- 11 providers to pay 100 percent of the nursing facility base rate
- 12 to the nursing facility.
- 13 Pursuant to 2018 Iowa Acts, chapter 1038, DHS was directed to
- 14 review the hospice benefit for dually eligible individuals in
- 15 a nursing facility and report options for elimination of the
- 16 pass-through payments to the chairperson and ranking members
- 17 of the joint appropriations subcommittee on health and human
- 18 services, the legislative service agency, and the legislative
- 19 caucus staffs on or before October 1, 2018. DHS submitted
- 20 the report that included four options. The bill reflects
- 21 option 1 of the report which is budget neutral with regard to
- 22 the dually eligible members and would require DHS to request
- 23 federal approval to allow Medicaid managed care organizations
- 24 and the Medicaid fee-for-service payment system to pay the
- 25 nursing facility directly for the nursing facility room and
- 26 board costs, and eliminate the pass-through payment utilizing
- 27 the hospice provider.